

CLASSIFIED MATERIAL ACCESS CERTIFICATION

CNET 5521/11 (Rev. 3-97)

PART I

NAME (last, first, middle)		SSN	RANK/RATE/GRADE	
From: _____ (department or equivalent)			To: Security Manager	
The duties of the above person require access to _____			Date _____	
material classified _____				
For civilians only - Position sensitivity code on _____				
Optional Form 8 is _____. See reverse for code definitions.			Signature _____	
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FIRST ENDORSEMENT (Office maintaining personnel record)			Date _____	
The following information was obtained from the service record/official personnel file of the person named above:				
Birth Date	Birth Place	Citizenship	Immigrant Alien <input type="checkbox"/> Yes <input type="checkbox"/> No	Foreign Nat'l <input type="checkbox"/> Yes <input type="checkbox"/> No
Type Investigation	Date Completed	Agency		
Record contains information which should be examined before access is granted.			Signature (PERSOFF, SECMGR or other designated official)	
<input type="checkbox"/> Yes <input type="checkbox"/> No			Date _____	
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SECOND ENDORSEMENT (Medical Officer)			Date _____	
Medical record contains information which should be examined before access is granted.				
<input type="checkbox"/> Yes <input type="checkbox"/> No			Signature of Medical Officer	
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THIRD ENDORSEMENT (Security Manager)			Date _____	
Clearance and access granted at the _____ level.				
Orientation briefing given. Standard Form 312 executed.			Signature of Security Manager	
NAME (Last, first, middle)		SSN	RANK/RATE/GRADE	

DETACH AND RETURN TO ORIGINATING DIVISION/DEPARTMENT

PART II

CLASSIFIED MATERIAL ACCESS CERTIFICATION

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Birth Date	Birth Place	Citizenship	Immigrant Alien <input type="checkbox"/> Yes <input type="checkbox"/> No	Foreign Nat'l <input type="checkbox"/> Yes <input type="checkbox"/> No
Security Clearance/Access/Type Investigation/Agency Completing/Date				
NAME (last, first, middle)		SSN	RANK/RATE/GRADE	